



Attorney Docket No. 0933-0214P

BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747
Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE:
YOU MUST
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FOLLOWING

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title: NOVEL HUMAN GENE FUNCTIONALLY RELATED TO DYSLEXIA

Fill in Appropriate: the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:

Information - The specification was filed on October 9, 2003 as
For Use Without United States Application Number 10/681,199 (if applicable) and/or
Specification and amended on _____ as PCT
Attached: the specification was filed on _____ and was
International Application Number _____ (if applicable)
amended on _____

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

Insert Priority
Information:
(if appropriate)

(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.

Insert Provisional
Application(s):
(if any)

(Application Number)	(Filing Date)
<u>60/355,782</u>	<u>February 12, 2002</u>
_____	_____
_____	_____

All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:

Insert Requested
Information:
(if appropriate)

Country	Application Number	Date of Filing (Month/Day/Year)
_____	_____	_____
_____	_____	_____

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Insert Prior U.S.
Application(s):
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(Application Number)	(Filing Date)	(Status - patented, pending, abandoned)
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_____	_____	_____
<u>PCT/FI03/00110</u>	<u>February 12, 2003</u>	<u>Filed</u>
_____	_____	_____

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

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FOLLOWING:**

Full Name of First
or Sole Inventor:
Insert Name of
Inventor. This
Document is Signed

Insert Residence
Insert Citizenship

Insert Post Office
Address


Full Name of Second
Inventor, if any:
see above

Full Name of Third
Inventor, if any:
see above

Full Name of Fourth
Inventor, if any:
see above

Full Name of Fifth
Inventor, if any:
see above

Full Name of Sixth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME Juha KERE	INVENTOR'S SIGNATURE 	DATE* Nov 27, 2003
Residence (City, State & Country) Stockholm, SWEDEN	CITIZENSHIP Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country) Gästerikegatan 11, 113 62 Stockholm, SWEDEN		
GIVEN NAME/FAMILY NAME Mikko TAIPALE	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Heidelberg, GERMANY	CITIZENSHIP Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country) Heiliggeiststrasse 11, 69117 Heidelberg, GERMANY		
GIVEN NAME/FAMILY NAME Jaana NOPOLA-HEMMI	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Helsinki, FINLAND	CITIZENSHIP Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country) Haapalahdenkatu 11 C 20, FIN-00300 Helsinki, FINLAND		
GIVEN NAME/FAMILY NAME Nina KAMINEN	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Helsinki, FINLAND	CITIZENSHIP Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country) Isonnevantie 7-9 C 22, FIN-00320 Helsinki FINLAND		
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Residence (City, State & Country)	CITIZENSHIP	
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*DATE OF SIGNATURE



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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First
or Sole Inventor:
Insert Name of
Inventor
Insert Date This
Document is Signed

Insert Residence
Insert Citizenship

Insert Post Office
Address

Full Name of Second
Inventor, if any:
see above

Full Name of Third
Inventor, if any:
see above

Full Name of Fourth
Inventor, if any:
see above

Full Name of Fifth
Inventor, if any:
see above

Full Name of Sixth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Juha KERE		
Residence (City, State & Country)	CITIZENSHIP	
Stockholm, SWEDEN	Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country)		
Gästerikegatan 11, 113 62 Stockholm, SWEDEN		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Mikko TAIPALE	<i>Mikko Taipale</i>	Nov 27, 2003
Residence (City, State & Country)	CITIZENSHIP	
Heidelberg, GERMANY	Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country)		
Heiliggeiststrasse 11, 69117 Heidelberg, GERMANY		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Jaana NOPOLA-HEMMI		
Residence (City, State & Country)	CITIZENSHIP	
Helsinki, FINLAND	Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country)		
Haapalahdenkatu 11 C 20, FIN-00300 Helsinki, FINLAND		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Nina KAMINEN		
Residence (City, State & Country)	CITIZENSHIP	
Helsinki, FINLAND	Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country)		
Isonnevantie 7-9 C 22, FIN-00320 Helsinki FINLAND		
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Residence (City, State & Country)	CITIZENSHIP	
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(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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	<u>60/353,782</u>	<u>February 12, 2002</u>

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Full Name of First
or Sole Inventor:
Insert Name of
Inventor
Insert Date This
Document is Signed

Insert Residence
Insert Citizenship

Insert Post Office
Address

Full Name of Second
Inventor, if any:
see above

Full Name of Third
Inventor, if any:
see above

Full Name of Fourth
Inventor, if any:
see above

Full Name of Fifth
Inventor, if any:
see above

Full Name of Sixth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Juha KERE		
Residence (City, State & Country)	CITIZENSHIP	
Stockholm, SWEDEN	Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country)		
Gästerikogatan 11, 113 62 Stockholm, SWEDEN		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Mikko TAIPALE		
Residence (City, State & Country)	CITIZENSHIP	
Heidelberg, GERMANY	Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country)		
Heiliggeiststrasse 11, 69117 Heidelberg, GERMANY		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Jaana NOPOLA-HEMMI	<i>J. Hemmi</i>	December 3, 2003
Residence (City, State & Country)	CITIZENSHIP	
Helsinki, FINLAND	Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country)		
Haapalahdenkatu 11 C 20, FIN-00300 Helsinki, FINLAND		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Nina KAMINEN		
Residence (City, State & Country)	CITIZENSHIP	
Helsinki, FINLAND	Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country)		
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or Sole Inventor:
Insert Name of
Inventor
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Address

Full Name of Second
Inventor, if any:
see above

Full Name of Third
Inventor, if any:
see above

Full Name of Fourth
Inventor, if any:
see above

Full Name of Fifth
Inventor, if any:
see above

Full Name of Sixth
Inventor, if any:
see above

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Juha KERE		
Residence (City, State & Country)	CITIZENSHIP	
Stockholm, SWEDEN	Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country)		
Gästerikegatan 11, 113 62 Stockholm, SWEDEN		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Mikko TAIPALE		
Residence (City, State & Country)	CITIZENSHIP	
Heidelberg, GERMANY	Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country)		
Heiliggeiststrasse 11, 69117 Heidelberg, GERMANY		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Jaana NOPOLA-HEMMI		
Residence (City, State & Country)	CITIZENSHIP	
Helsinki, FINLAND	Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country)		
Haapalahdenkatu 11 C 20, FIN-00300 Helsinki, FINLAND		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Nina KAMINEN	<i>Nina Kaminen</i>	December 2, 2003
Residence (City, State & Country)	CITIZENSHIP	
Helsinki, FINLAND	Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country)		
Isonnevantie 7-9 C 22, FIN-00320 Helsinki FINLAND		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)	CITIZENSHIP	
MAILING ADDRESS (Complete Street Address including City, State & Country)		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)	CITIZENSHIP	
MAILING ADDRESS (Complete Street Address including City, State & Country)		

*DATE OF SIGNATURE